# JC20 Rec'd PCT/PTO 2 5 OCT 2005

# **Application Data Sheet**

Secrecy Order in Parent Appl.::

Application Information	
Application number::	
Filing Date::	
Application Type::	Regular
Subject Matter::	Utility
Suggested classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R??::	
Number of CD disks::	
Number of copies of CDs::	
Sequence Submission::	Paper
Computer Readable Form (CRF)?::	Yes
Number of copies of CRF::	1
Title::	METHODS FOR MEASURING THE INSULIN
	RECEPTOR ALPHA SUBUNIT
Attorney Docket Number::	082368-006600US
Request for Early Publication::	No
Request for Non-Publication::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	9
Small Entity?::	Yes
Latin name::	
Variety denomination name::	•
Petition included?::	No
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers One::	

No

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Initial 10/24/05

### **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Japan

Status:: Full Capacity

Given Name:: Yousuke

Middle Name::

Family Name:: Ebina

Name Suffix::

City of Residence:: Tokushima-shi

State or Province of Residence:: Tokushima

Country of Residence:: Japan

Street of Mailing Address:: 3-48, Kamifukuman, Hachiman-cho

City of Mailing Address:: Tokushima-shi

State or Province of mailing address:: Tokushima

Country of mailing address:: Japan

Postal or Zip Code of mailing address:: 770-8073

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Japan

Status:: Full Capacity

Given Name:: Toshiyuki

Middle Name::

Family Name:: Obata

Name Suffix::

City of Residence:: Tokushima-shi

State or Province of Residence:: Tokushima

Country of Residence:: Japan

Street of Mailing Address:: 3-75-101, Shinhama-cho 2-chome

City of Mailing Address:: Tokushima-shi

State or Province of mailing address:: Tokushima

Country of mailing address::

Japan

Postal or Zip Code of mailing address:: 770-8006

**Applicant Authority Type:**:

Inventor

Primary Citizenship Country::

Japan

Status::

Full Capacity

Given Name::

Eiji

Middle Name::

Family Name::

Okamoto

Name Suffix::

City of Residence::

Ina-shi

State or Province of Residence::

Nagano

Country of Residence::

Japan

Street of Mailing Address::

c/o Medical and Biological Laboratories Co., Ltd.

1063-103, Aza Oohara, Ooaza Terasawaoka

City of Mailing Address::

Ina-shi

State or Province of mailing address::

Nagano

Country of mailing address::

Japan

Postal or Zip Code of mailing address::

396-0002

# **Correspondence Information**

Correspondence Customer Number::

20350

# **Representative Information**

Representative Customer Number::

20350

### **Domestic Priority Information**

Application::

Continuity Type::

Parent Application::

Parent Filing Date::

This application

National Stage of

PCT/JP04/005412

04/15/04

# **Foreign Priority Information**

Country:: Application number:: Filing Date::

 Japan
 2003-121955
 04/25/03

 Japan
 2003-433303
 12/26/03

# **Assignee Information**

Assignee Name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::